

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		06-06-01
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	12	6/14/01
FORMALITY REVIEW	<i>[Signature]</i>	982	08-02-01
RESPONSE FORMALITY REVIEW	A-M	JC 580	10-15-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	✓
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6	✓
7	0
8	0
9	✓
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18	✓
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22	✓
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27	✓
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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